

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	100	75331	
O.I.P.E. CLASSIFIER	J	15	12/27/00
FORMALITY REVIEW	80	68331	16-00
RESPONSE FORMALITY REVIEW	11	11	2/10/00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	10/16/00
2	✓	✓	10/16/00
3	✓	✓	10/16/00
4	✓	✓	10/16/00
5	✓	✓	10/16/00
6	✓	✓	10/16/00
7	✓	✓	10/16/00
8	✓	✓	10/16/00
9	✓	✓	10/16/00
10	✓	✓	10/16/00
11	✓	✓	10/16/00
12	✓	✓	10/16/00
13	✓	✓	10/16/00
14	✓	✓	10/16/00
15	✓	✓	10/16/00
16	✓	✓	10/16/00
17	✓	✓	10/16/00
18	✓	✓	10/16/00
19	✓	✓	10/16/00
20	✓	✓	10/16/00
21	✓	✓	10/16/00
22	✓	✓	10/16/00
23	✓	✓	10/16/00
24	✓	✓	10/16/00
25	✓	✓	10/16/00
26	✓	✓	10/16/00
27	✓	✓	10/16/00
28	✓	✓	10/16/00
29	✓	✓	10/16/00
30	✓	✓	10/16/00
31	✓	✓	10/16/00
32	✓	✓	10/16/00
33	✓	✓	10/16/00
34	✓	✓	10/16/00
35	✓	✓	10/16/00
36	✓	✓	10/16/00
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			
48			
49			
50			

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY